### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**TEMPORARY** 

# OMB APPROVAL OMB Number:

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March 31, 2009

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### NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

FORM D

Name of Offering ([ ] check if this is an amendment	and name has chan	ged, and indicat	e change.)		
OHA Capital Solutions, L.P.					
Filing Under (Check box(es) that apply):	[ ] Rule 504	[ ] Rule 505	[X] Rule 506	[ ]Section 4(6)	[ ]ULOE
Type of Filing: [X] New Filing	[ ] Amendment				
	A. BASIC ID	ENTIFICATIO	ON DATA		
Enter the information requested about the issue					
Name of Issuer ([] check if this is an amendment an	d name has change	d, and indicate	change.)		
OHA Capital Solutions, L.P.				090382	
Address of Executive Offices (Numb	er and Street, City,	State, Zip Code	e) Telephone Numb	er (mendanig rated code)	
201 Main Street, Suite 1910, Fort Worth, T	X 76102		817-338-8391		SEC
Address of Principal Business Operations (Numb	er and Street, City,	State, Zip Code	e) Telephone Numb	er (Including Area Code)	Mall Processing
(if different from Executive Offices)					Section
Brief Description of Business Hedge Fund					MAR 16 2009
Type of Business Organization					IMIL 10 5000
[ ] corporation [X] limited partnership, already	formed	[ ] other (please	e specify):		
[ ] business trust [ ] limited partnership, to be for	med			·- <u></u>	Washington, DC
	]	Month	Year		122
Actual or Estimated Date of Incorporation or Organiz	zation:	[02]	[ 07 ]	-	X] Actual
					] Estimated
Jurisdiction of Incorporation or Organization:	(Enter two-lette	er U.S. Postal So	ervice abbreviation for	State:	
	CN for Canada	; FN for foreign	jurisdiction)		DE ]

GENERAL INSTRUCTIONS Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500) only to issuers that file with the Commission a notice on Temporary From D (17 CFR 239.500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using Form D (17 CFR 239.500) and otherwise comply with all the requirements of § 230.503T.

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. The copy not manually signed must be a photocopy of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

#### ATTENTION

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a SEC 1972 (9-08) currently valid OMB control number

### A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition, of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner [X] General and/or Managing Partner	[ ] Executive Officer	[ ] Director
Full Name (Last name first, if indi-			
OHA Capital Solutions GenPar	•		
	umber and Street, City, State, Zip Code)		
201 Main Street, Suite 1910, Fo			
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[ ] Executive Officer	[ ] Director
enten Zen(es) man rippry.	[X] General and/or Managing Member	( 1 =	[ ]=
Full Name (Last name first, if indiv			
OHA Capital Solutions MGP, I			
	umber and Street, City, State, Zip Code)		
201 Main Street, Suite 1910, Fo			
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[X] Executive Officer	[ ] Director
, , , , , , , , , , , , , , , , , , , ,	[ ] General and/or Managing Member		
Full Name (Last name first, if indiv	vidual)		
August, Glenn R.			
Business or Residence Address (N	umber and Street, City, State, Zip Code)		
c/o Oak Hill Advisors, 1114 Ave	enue of the Americas, New York, New York 10036		
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[X] Executive Officer	[ ] Director
• • • • • • • • • • • • • • • • • • • •	[ ] General and/or Managing Member		
Full Name (Last name first, if indiv	vidual)		
Bohnsack, Jr., William H.	·		
	umber and Street, City, State, Zip Code)		
	enue of the Americas, New York, New York 10036		
Check Box(es) that Apply:	Promoter Beneficial Owner	[X] Executive Officer	[ ] Director
, , , , , ,	[ ] General and/or Managing Member		
Full Name (Last name first, if indiv			
Krase, Scott D.	,		
	umber and Street, City, State, Zip Code)		
	enue of the Americas, New York, New York 10036		
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[ ] Executive Officer	[ ] Director
	[ ] General and/or Managing Partner	• •	
Full Name (Last name first, if indiv			
,	,		
Business or Residence Address (No	umber and Street, City, State, Zip Code)		
•			
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[ ] Executive Officer	[ ] Director
( ) 11 )	[ ] General and/or Managing Partner		
Full Name (Last name first, if indiv			
,	•		
Business or Residence Address (Nu	umber and Street, City, State, Zip Code)		
•			
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[ ] Executive Officer	[ ] Director
	[ ] General and/or Managing Partner		
Full Name (Last name first, if indiv	ridual)		
Business or Residence Address (Nu	umber and Street, City, State, Zip Code)		
	(Use blank sheet, or copy and use additional copies of	this sheet, as necessary.)	

interio.			200		B. IN	FORMA	TION A	воит о	FFERIN	G		W.		
1.	Has the issue	er sold, or	does the is	suer intend	to sell, to	non-accres	dited inves	tors in this nn 2, if fili	offering? ing under U	JLOE.	100		Yes	
	What is the	ninimum i	nvestment	that will b	e accepted	l from any	individual	?					\$	2,000,000
													V	NI-
3.	Does the off	ering perm	it joint ow	nership of	a single u	nit?							Yes [X	
4.	Enter the infremuneration agent of a br be listed are	n for solici oker or de	tation of p aler registe	urchasers ered with t	in connect he SEC an	ion with sa d/or with a	ales of secu a state or s	urities in th tates, list tl	ne offering he name of	If a perso the broke	on to be list r or dealer	sted is an a . If more t	ssociated pohan five (5)	erson or persons to
Full	Name (Last r	name first,	if individu	al)										
Bus	iness or Resid	ence Addr	ess (Numb	er and Str	eet, City, S	State, Zip C	Code)						· ····	
Nan	ne of Associat	ed Broker	or Dealer								·			
Stat	es in Which P	erson Liste	ed Has Sol	icited or In	tends to S	olicit Purcl	nasers							
	(Check	"All State	s" or check	c individua	ıl States)								[ ] Al	1 States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Full	Name (Last n	ame first,	if individu	al)				· · · · · · · · · · · · · · · · · · ·						
Bus	iness or Resid	ence Addr	ess (Numb	er and Str	eet, City, S	state, Zip C	ode)						······································	
Nan	ne of Associat	ed Broker	or Dealer											
State	es in Which P	erson Liste	ed Has Sol	icited or In	tends to S	olicit Purcl	nasers		<u> </u>					
	(Check	"All State	s" or check	c individua	l States)								[ ]A	ll States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Full	Name (Last n	ame first,	if individu	al)										
Busi	iness or Resid	ence Addr	ess (Numb	er and Stre	eet, City, S	tate, Zip C	ode)					· · · · · · · · · · · · · · · · · · ·		
Nan	ne of Associat	ed Broker	or Dealer										·	
State	es in Which P	erson Liste	ed Has Soli	icited or In	tends to S	olicit Purcl	nasers				<u> </u>			
	(Check	"All State:	s" or check	individua	1 States)								[ ] All	States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
				(Use blank	sheet, or	copy and u	se addition	al copies o	of this shee	t, as neces	sary.)			

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [ ] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate	Amount Already
	.,p. 0.1 0.0	Offering Price	Sold
	Debt	\$N/A	\$N/A
	Equity	\$N/A	\$N/A
	[] Common [] Preferred		
	Convertible Securities (including warrants )	\$ N/A	\$ N/A
	Partnership Interests	\$ Unlimited	\$ 68,370,00
	Other (specify)	\$ N/A	S N/A
	Total	\$ Unlimited	\$ 68,370,000
	Answer also in Appendix, Column 3, if filing Under ULOE	5 Ommed	<u> </u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number	Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors	2	\$68,370,000
	Non-accredited Investors	0	\$ <u> </u>
	Total (for filings Under Rule 504 Only)	N/A	\$N/A
	Answer also in Appendix, Column 4 if filing under ULOE		
3.	If this filing is for an offering Under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		
	Type of offering	Type of	Dollar Amount
		Security	Sold
	Rule 505	N/A	\$
	Regulation A	N/A	\$ N/A
	Rule 504	N/A	\$N/A
	Total	N/A	\$N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	[X]	\$ <u>0</u>
	Printing and Engraving Costs	[X]	\$
	Legal Fees	[X]	\$ <u>110,439</u>
	Accounting Fees	[X]	\$234
	Engineering Fees	[X]	\$0
	Sales Commissions (Specify finder's fees separately)		\$0
	Other Expenses (identify):		\$ 78,391
	Total		\$ 189,064

	C. OFFERING PRICE, NUMBER O	F INVESTORS, E	XPEN	NSES A	ND U	SE OF PRO	CEEDS	
	<ul> <li>b. Enter the difference between the aggregate offering price</li> <li>Question 1 and total expenses furnished in response to l</li> <li>difference is the "adjusted gross proceeds to the issuer."</li> </ul>	Part C – Question 4.a.	This				\$ <u> </u>	68,180,936
5.	Indicate below the amount of the adjusted gross proce proposed to be used for each of the purposes shown. If th not known, furnish an estimate and check the box to the le of the payments listed must equal the adjusted gross proce response to Part C – Question 4.b above.	e amount for any purpo oft of the estimate. The	se is total					
	response to Fait C - Question 4.0 above.					to Officers, & Affiliates	Pay	ments To Other
	Salaries and fees		[]	\$	N/A	[]	<b>s</b>	N/A
	Purchase of real estate		[]	\$	N/A	[]	\$	N/A
	Purchase, rental or leasing and installment of machine	ry and equipment	[]	\$	N/A	[]	\$	N/A
	Construction or leasing of plant buildings and facilities	5	[]	<b>s</b>	N/A	[]	s	N/A
	Acquisition of other businesses (including the value of in this offering that may be used in exchange for the a	ssets of securities	r 1	c	N/A	[]	c	N/A
	of another issuer pursuant to a merger)  Repayment of indebtedness		[]	\$ \$	N/A	[]	s	N/A
	Working capital		[]	s_	N/A	( )	s	N/A
	Other:		[]	s	N/A	[X]	•	8,180,936
			• -	<b>J</b>	IVA			
	Column totals		[]	<b>S</b>		[X]	\$ <u>        6                            </u>	8,180,936
<del></del>	Total payments listed (column totals added)			[X]	<b>S</b>	68,180,936		
Art. 1		FEDERAL SIGNATU			<u> </u>			
onstitu	uer has duly caused this notice to be signed by the undersigned ates an undertaking by the issuer to furnish to the U.S. Securitie er to any non-accredited investor pursuant to paragraph (b)(2) or	s and Exchange Comm						
suer (	Print or Type)	Signature				//	Date	
OHA Capital Solutions, L.P.			C	M			March !	3,200 <del>9</del>
lame of Signer (Print or Type)  Title of Signer (Pr Wember of the U								

## Attention

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)